

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: NEGATIVE PRESSURE TYPE BOOSTER  
DEVICE

Attorney Docket Number:: 1033697-000026

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?: No

Latin Name:

Variety Denomination Name:

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Kaoru

Middle Name:

Family Name: TSUBOUCHI

Name Suffix:

City of Residence: Kariya-shi

State or Province of Residence: Aichi

Country of Residence: Japan

Street of Mailing Address: c/o ADVICS CO., LTD., 2-1, Showa-cho

City of Mailing Address: Kariya-shi

State or Province of Mailing Address::	Aichi
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8688
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yoji
Middle Name::	
Family Name::	INOUE
Name Suffix::	
City of Residence::	Kariya-shi
State or Province of Residence::	Aichi
Country of Residence::	Japan
Street of Mailing Address::	c/o ADVICS CO., LTD., 2-1, Showa-cho
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8688
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity

Given Name::	Koichi
Middle Name::	
Family Name::	HASHIDA
Name Suffix::	
City of Residence::	Kariya-shi
State or Province of Residence::	Aichi
Country of Residence::	Japan
Street of Mailing Address::	c/o ADVICS CO., LTD., 2-1, Showa-cho
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8688
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Tomoyasu
Middle Name::	
Family Name::	SAKAI
Name Suffix::	
City of Residence::	Kariya-shi
State or Province of Residence::	Aichi

Country of Residence:: Japan  
Street of Mailing Address:: c/o ADVICS CO., LTD., 2-1, Showa-cho  
City of Mailing Address:: Kariya-shi  
State or Province of Mailing Address:: Aichi  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 448-8688

### **Correspondence Information**

Correspondence Customer Number:: **21839**  
Phone Number:: 703.836.6620  
Fax Number: 703.836.2021

### **Representative Information**

Representative Customer Number:: **21839**

### **Domestic Priority Information**

**Application:: Continuity Type:: Parent Application:: Parent Filing Date::**  
This Application National Stage of PCT/JP2006/300669 01/12/2006

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Japan	2005-004979	01-12-2005	Yes
Japan	2005-085928	03-24-2005	Yes
Japan	2005-186065	06-27-2005	Yes